(b) if so, the steps being taken by Government to improve their condition?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Improvement is a continuous process and Government is striving to improve the condition of the hospitals by augmenting infrastructural facilities, equipments and manpower etc. within the available resources.

Registration of Charitable Trusts

1573. SHRI CO. POULOSE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the number of charitable trusts (NGOs) which were registered during the last two years?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): There is no scheme for registration of charitable trusts (NGOs) in this Ministry. However, the Department of Indian System of Medicine and Homoeopathy do fund NGOs for IEC Schemes and accredit Institutions/NGOs for Research Schemes.

Death of Kids due to Diseases

1574. SHRI KRISHNA KUMAR BIRLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item captioned, "Ten million kids die each year from diseases", which appeared in the Statesman dated 11 th June, 2001;

(b) if so, whether Government are aware of the number of kids died each year in the country due to diseases;

(c) if so, the details thereof;

(d) the factors responsible for such deaths of kids in India; and

(e) the steps taken to check such deaths?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir. The news-item has come to Government's notice.

(b) to (e) As per the Sample Registration system the infant mortality rate for India in 1999 was estimated to be 70 per 1000 live births and child mortality rate in the age group 0—4 years was estimated to be 22.5 per 1000 children during 1998. At these rates it is estimated that about 2.4 million children

under the age of 5 years die every year. Major causes of child mortality include pre-mature birth, acute respiratory infections, diarrhoeal diseases and vaccine preventable diseases. Contributory factors, *inter-alia,* include high prevalence of low birth weight babies and high malnutrition rates in children. Under the Reproductive and Child Health Programme, immunization against six vaccine preventable diseases, facilities for appropriate management of acute respiratory infections and diarrhoea) diseases and essential new born care are provided. Promotion of exclusive breastfeeding and appropriate complementary feeding practices, and prophylaxis against vitamin-a and iron deficiencies are being provided to improve nutritional status of children.

Supreme Court's Direction on Pre-Natal Diagnostic Technique Act

1575. SHRl KRISHNA KUMAR BIRLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether, with the rising scale of femicide, the Supreme Court had recently directed Government to strictly enforce the Pre-Natal Diagnostic Technique (Regulation and Prevention of Misuse) Act, and if needed, to amend the Act to plug any loopholes;

(b) if so, the gravity of the situation according to the assessment made, if any, by Government; and

(c) the steps contemplated by Govemment in view of the Supreme Court directive?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) the Supreme Court in a Public Interest Litigation filed by Centre for Enquiry into Health and Allied Themes (CEHAT) & Ors Vs. Union of India and Others, has issued directions on 4th May, 2001 to the Central Government, State Governments, and appropriate Authorities to take steps for effective implementation of the Act. The Supreme Court has also directed Central Supervisory Board to examine the necessity to amend the Act keeping in mind emerging technologies and difficulties encountered in implementation of the Act and to make recommendations to the Central Government.

(b) Despite the existence of the law [Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994, in force since 1.1.1996] banning the determination of the sex of the foetues and subsequent abortion of female foetus, only a few cases of female foeticide have been reported, though the provisional figures of Census 2001 indicate that the sex ratio in 0—6 age group has come down drastically, particularly in the states of Punjab, Gujarat, Haryana, Himachal Pradesh, Chandigarh and Delhi.